| PATENT | APPLICATION | FEE | DETE   | RMINATION | RECORD |
|--------|-------------|-----|--------|-----------|--------|
|        | Effective   | Oct | oher 1 | 2000      |        |

Application or Docket Number

09757470

|   |  |   |                |              |  |                  | 07151470   |                |                        |                  |            |                        |
|---|--|---|----------------|--------------|--|------------------|------------|----------------|------------------------|------------------|------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                |              |  |                  | SMALL E    | YTITY          | OR                     | OTHER<br>SMALL   |            |                        |
| TOTAL CLAIMS  |  | 16  |                |              |  |                  | RATE       | FEE            |                        | RATE             | FEE        |                        |
| FOR   |  | NUMBER FILED                              |                | NUMBER EXTRA |  |                  | BASIC FEE  | 355.00         | OR                     | BASIC FEE        | 710.00     |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | 16 minus 20= * |              | •  | . ,              |            | X\$ 9=         |                        | OR               | X\$18=     |                        |
| INE   | EPENDENT CL                                    | AIMS                                      | 2 mi           | nus 3 =      | •  | /                |            | X40=           |                        | OR               | X80=       |                        |
| MULTIPLE DEPENDENT CLAIM PRE  |  |   | RESENT         |              |  |                  |            |                | -                      |                  |            |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                |              |  |                  | 8          | +135=          |                        | OR               | +270=      |                        |
|   |  |   |                |              |  |                  |            | TOTAL          |                        | OR               | TOTAL      | 710                    |
| CLAIMS AS AMENDED - PART II(Column 1) (Column 2) (Column 3)   |  |   |                |              | (Column 3)                                   |                  | SMALL      | ENTITY         | OR                     | OTHER<br>SMALL I |            |                        |
| <u></u>   | ,  | CLAIMS                                    | }              | HIGH         |  | 1                | 7          |                |                        | 33               |            |                        |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUM<br>PREVI | IBER   | PRESENT<br>EXTRA |            | RATE           | ADDI-<br>TIONAL<br>FEE |                  | RATE       | ADDI-<br>TIONAL<br>FEE |
| 9   | Total  | .31                                       | Minus          | ·)           | )  | = //             |            | X\$ 9=         |                        | OR               | X\$18=     | 198n                   |
| S.W.E.  | Independent                                    | • 4                                       | Minus          | •••          | <u>}                                    </u> | = /              |            | X40=           |                        | OR               | X80=       | 36                     |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |              |  |                  | .125       |                |                        | +270=            | 00         |                        |
|   |  |   |                |              |  |                  |            | +135=<br>TOTAL |                        | OR               | TOTAL      |                        |
|   |  |   |                |              |  |                  |            | ADDIT. FEE     |                        | OR               | ADDIT. FEE |                        |
|   |  | (Column 1)                                |                | (Colu        |  | (Column 3)       | <u>)</u>   |                |                        |                  |            |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | PREVI        | HEST<br>IBER<br>OUSLY<br>FOR                 | PRESENT<br>EXTRA |            | RATE           | ADDI-<br>TIONAL<br>FEE |                  | RATE       | ADDI-<br>TIONAL<br>FEE |
| NOS.  | Total  | •   | Minus          | ••           |  | =                |            | X\$ 9=         |                        | OR               | X\$18=     |                        |
| AME   | Independent                                    | •   | Minus          | ***          |  | =                | -          | X40=           |                        | OR               | X80=       |                        |
| L.  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |              |  |                  |            | +135=          |                        | OR               | +270=      |                        |
|   |  |   |                |              |  |                  |            | TOTAL          |                        | OR               | TOTAL      |                        |
|   |  | (Column 1)                                |                | (Colu        | mn 21  | (Column 3)       |            | ADDIT. FEE     |                        | g - · ·          | ADDIT. FEE |                        |
|   |  | CLAIMS                                    | 20.4.6         | HIGH         |  | 1                | <b>ا</b> ا |                |                        | ı                |            |                        |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUM<br>PREVI | BER<br>OUSLY<br>FOR                          | PRESENT<br>EXTRA |            | RATE           | ADDI-<br>TIONAL<br>FEE |                  | RATE       | ADDI-<br>TIONAL        |
|   | Total  | •   | Minus          | ••           | <del></del>                                  | =                |            | X\$ 9=         | 165                    |                  | X\$18=     | FEE                    |
|   | Independent                                    | •   | Minus          | •••          |  | =                |            |                |                        | OR               | <b></b>    |                        |
| M.  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |              |  | 1                | X40=       |                | OR                     | X80=             |            |                        |
| +135= OR +270=  |  |   |                |              |  |                  |            |                |                        |                  |            |                        |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE |  |   |                |              |  |                  |            |                |                        |                  |            |                        |